

Medical Care Advisory Committee

Minutes of Meeting July 16, 2015

Participants

Committee Members Present

Andrew Riggle (vice chair), Danny Harris, Mark Brasher, Mark Ward, Jonathan George, Tina Persels, RyLee Curtis, Emma Chacon (for Michael Hales), Jonathan George

Committee Members Excused

Russ Elbel (chair), Kevin Burt, Debra Mair, Steve Mickelson, Jason Horgesheimer

Committee Members Absent

Sara Carbajal-Salisbury, LaVal Jensen, Michelle McOmber, Jackie Rendo, Donna Singer

UDOH Staff

Tonya Hales, Jeff Nelson, Jason Stewart, Gina Stavros, Shandi Adamson, John Curless, Julie Ewing, Janica Gines, Craig Devashrayee, Greg Trollan

Visitors

Alan Pruhs, Amy Bingham

Welcome

Andrew Riggle, Vice Chair, called the meeting to order at 1:35.

Budget Recommendation Priority Voting

Andrew asked whether there were any more questions from the committee regarding the presentations made in June. There were none.

Emma re-stated how the prioritization process works. The MCAC provides its recommendations to the Division which are then considered when the Division and Department develop their funding requests. The Governor then uses those recommendations when formulating his budget in preparation for the legislative session. The legislature then determines which items are funded.

The committee took five minutes to fill in the ballots prioritizing the budget recommendations. Josip Ambrenac tallied the votes.

Open Seats on MCAC

The Business Community and the Long-Term Care Community still have available seats.

Jonathan George was introduced as the new MCAC member representing pharmacists. Jonathan has been a pharmacist since 2009.

Rylee Curtis announced her resignation, effective after the August meeting. She will be moving to Georgia for her husband's job.

New Rulemakings

Craig Devashrayee reported on State Plan Amendments and new rulemakings. His report is attached to these minutes. There were no questions from the committee or the audience.

Budget Updates

Individuals over 65, people with disabilities, and pregnant women are showing the trends we would expect to see. Enrollment for children is leveling off, and enrollment for adults is going up. We will open PCN enrollment on July 27 for adults with dependent children.

Update on ACO Transition in New Counties

81% of Medicaid enrollees are participating in an ACO. The transition is going fairly smoothly. We have had calls from providers with concerns about how to get on to plan panels. We worked with the plans to provide them with reports for their enrollees with private duty nursing services or existing prior authorizations. The plans will honor those prior auths for 90 days. We've provided lists to the plans of clients who are receiving treatment for hepatitis C (since those drugs are very expensive), and those who have more than three prescriptions.

A number of enrollees did not respond to choose their plan, so they were auto-assigned. They will have 90 days following enrollment to change their plans.

Emma asked the committee to direct any concerns about this process to Julie Ewing.

Alan Pruhs asked which plans had the highest enrollment. Emma did not have that data, but she said Molina and Health Choice had higher enrollment than expected in the expansion counties.

Community Health Centers Funding

Alan Pruhs gave an overview of the Health Centers. The Association of Utah Community Health provides technical assistance to the Health Centers.

In Utah, there are 13 Community Health Center organizations, with 738 FTEs, providing care to 123,000 patients. 57% of the patients served are uninsured. That number has been dropping over the years, but the expected number is closer to 35%. There is one base grant that has to serve all of those patients on a sliding fee scale.

Andrew asked who the insured patients were. Alan gave Bicknell as an example, where the CHC is the only doctor in town. They are starting to see more commercially insured patients along the Wasatch Front, who have been seeing a CHC provider and can now afford insurance.

Andrew asked what other funding the CHCs use. Alan said they can receive reimbursements for Medicare and Medicaid patients. Intermountain Healthcare gives grants to the Centers, and the State gives Primary Care Grants.

Utah has a Migrant Health Center in Box Elder County. Fourth Street Clinic is a Healthcare for the Homeless type, and there will be two new homeless clinics opening in Utah County and Ogden. We don't have any public housing clinics. The target population is 200% FPL and below.

CHCs are governed by community boards. 51% of the boards must be composed of clinic patients. Clinics provide primary care, behavioral health, and dental services, either on-site or through professional affiliations. Dental care is difficult, but most clinics have dentists on site. Services are available to all. Uninsured patients are seen on a sliding scale. Homeless clinics don't charge. Patients are not denied care if they cannot pay.

AUCH has applied for \$2.8M in expanded services funding to address some of the unmet needs, such as dental care.

Rylee asked whether any of the patients served are undocumented. Alan said they don't check anyone's immigration status, but 35% of patients prefer a language other than English. Many of the patients are in mixed immigration households. Everyone is served, regardless of immigration status. This ultimately protects public health and saves money in emergency departments.

Andrew asked whether CHCs are able to recruit and retain staff. Alan said it's tough to recruit, but easier to retain. The loan repayment programs have been helpful for both. CHCs employ quite a few mid-level providers.

MMIS/PRISM Project Update

Jason Stewart reported on the PRISM project.

Release 3 has been pushed to February 2016 to avoid the holidays. Release 4 will be in summer 2017. CMS certification will take place in summer 2018. Knowledge transfer will happen in summer 2019.

Release 3 will include eMIPP, Provider Enrollment, and Provider Credentialing.

Payments will not be made from the new system until release 4. Provider information will be fed into the legacy system until then.

We are recruiting providers to participate in testing.

The primary way we communicate with providers is through the MIB. Please read those if you're a provider. PRISM staff have been attending meetings and panels in the community to seek interested testing. PRISM will be presenting at the annual provider training. There are messages on the Medicaid website, so please check that site frequently. Testing will take place November 20, 2015 – January 7, 2016. Testing will take about 2 hours. Sign up by sending an e-mail to prism@utah.gov.

Training will be available to providers in January and February of 2016. There is also training available on the website.

HCBS Updates

Tonya Hales reported.

The State has 7 HCBS waivers, with one more to come. Three were due for five-year renewals this year. Those applications were submitted in March. CMS has given an extension for us and many states while they review our applications.

CMS has a contractor to whom they're submitting states' transition plans. We have not received feedback on our transition plan yet, but it has been submitted.

A renewal for the Medicaid Autism Waiver was submitted to grandfather in current waiver recipients.

The Physical Disabilities, Acquired Brain Injury and Technology Dependent Waivers have also been submitted with requested changes.

We increased the number of unduplicated slots on the Tech Dependent waiver. We now have 139. We submitted an application for the Medically Complex Children waiver, and expect an effective date of October 1, pending CMS approval.

Director's Report

Emma Chacon reported for Michael Hales, who is at the legislative task force.

Dr. David Patton has submitted his resignation and will be moving to Molina Healthcare. It is unclear when a new Director will be appointed, but we expect a nomination from the Governor soon.

The Healthcare Reform Task Force is meeting today and met yesterday. The reports we've been getting say they're making decent progress. They will be meeting again on August 1. No matter what they come up with, we will have to write the waiver, submit it to CMS, and wait for their reply. We will continue to see how the discussions go. RyLee asked whether there would be an opportunity to submit public input. Emma said the legislative and waiver processes build in public input. Danny asked whether a bridge plan would still be on the table. Emma declined to speculate on what that might look like.

Andrew expressed concern that we're getting close to 2017, when states can change their plans. He asked whether any expansion would remain in place beyond 2017. Emma said they're more inclined to have an "escape hatch" in our plan.

PCN will be opening enrollment to adults with dependent children on July 27. We have not set an end date yet. If the numbers for adults without dependent children drop enough, we will consider opening enrollment to them. The PCN waiver is still good through December 31. The Governor has sent a request to the Secretary of HHS to extend the 1115 waiver. We are in the midst of discussing that with HHS.

Emma called the committee's attention to the new proposed managed care regulations issued July 1, 2015. They're the most significant changes to Medicaid Managed Care since 2002. If you have an interest, you can submit comment by July 27. The comments that have been submitted are available on the website. Josip will send the link with the minutes.

ICD-10: Effective October 1, Medicaid will transition to ICD-10, along with the rest of the industry. CMS will give a one year grace period for incorrect codes for Medicare. The Medicaid side hasn't issued any guidance. Jason Stewart would like to find providers who are willing to test claims with us.

Voting Results

Josip read the ballot results, which will be published on the website and are attached to these minutes. Emma said that the results will be considered in the Department's budget proposal to the Governor.

Adjourn

With no further business to consider, the meeting adjourned at 3:07 pm.